

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail Box ISSUE FEE

Commissioner for Patents Washington, D.C. 20231

(703)746-4000 **Fax**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CURRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

04/15/2003

Weide & Associates, Ltd. 11th Floor, Suite 1130 330 S. 3rd Street Las Vegas, NV 89101



Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Mary Burr	(Depositor's name)
MaryBurs	(Signature)
June 30, 2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR Rick Rowe			ATTORNEY DOCKET NO. C		CONFIRMATION NO.	
09/965,908	09/27/2001						5711	
TLE OF INVENTION: 1	METHOD AND SYSTEM	FOR FUNDING AND AW	'ARDING BONUSES	IN A GAMII	ig environ	MENT		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE \$300		TOTAL FEE(S) DUE \$1600		DATE DUE 07/15/2003	
nonprovisional	NO	\$1300						
EXAMINER		ART UNIT	CLASS-SUBCLASS	7				
ONEILL, MICHAEL W		3713	463-025000					
FR 1.363). C) Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. C) "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		the names of up to 3 or agents OR, altern single firm (having attorney or agent) as registered patent attor is listed, no name will	atively, (2) that as a member and the name meys or agent	ne name of a a registered s of up to 2	Weide_ 2	& Miller, L		
A) NAME OF ASSIGN	IGT 9295 Proto Reno, NV 8 te assignee category or cate	9521	on the patent) 🛛	individual !	X corporation (or other private g	group entity Q governor	
. The following fee(s) ar			nent of Fee(s):					
XO Issue Fee STA ch			heck in the amount of the fee(s) is enclosed.					
		Q Paymo	syment by credit card. Form PTO-2038 is attached.					
Advance Order - # of	Copies	St The C Deposit	The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 602200 (enclose an extra copy of this form).					
ommissioner for Patents	is requested to apply the las	sue Fee and Publication Fee	(if any) or to re-apply	any previou	sly paid issue f	fee to the applica	tion identified above.	
other than the applicant interest as shown by the	and Publication Fee (if rea	agent; or the assignee or	other party in	07/03/20	O3 JADDO2	00000031 09		
This collection of inform	records of the United States mation is required by 37 C it by the public which is to lity is governed by 35 U.S.C	Patent and Trademark Off FR 1.311. The information	is required to	01 FC:15 02 FC:15			965908 1300.00 QP 300.00 QP	

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.